

PART B - FEE(S) TRANSMITTAL



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23639 7590 10/06/2004

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Maripza Kidd (Deposi

December 15, 2004

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION
09/832,497	04/11/2001	Robert S. Behl	16807001530	1252

TITLE OF INVENTION: APPARATUS AND METHOD FOR TREATING TUMORS NEAR THE SURFACE OF AN ORGAN

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1370 \$1400	\$300	\$1670 \$1700	01/06/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
VRETTAKOS, PETER J	3739	607-099000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 BINGHAM MCCUTCHEN LLP

2 _____

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

SCIMED LIFE SYSTEMS, INC.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Maple Grove, Minnesota

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Gov

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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

David T. Burse

Date

12/15/04

Typed or printed name

David T. Burse

Registration No.

37,104

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